

Social Prescribing

What is it and how we make it work..

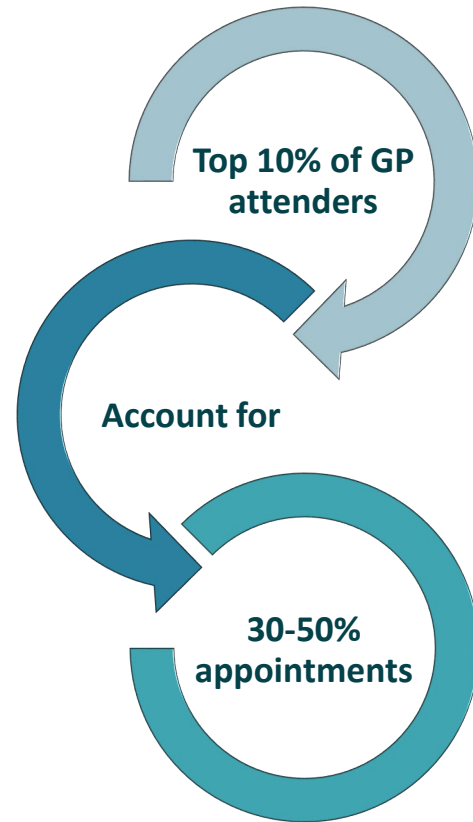
Tracey Johnson



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Patients who frequently attend GPs



ann. behav. med. (2018) 52:817–829
DOI: 10.1093/abm/kax054

REGULAR ARTICLE

Social Isolation Predicts Frequent Attendance in Primary Care

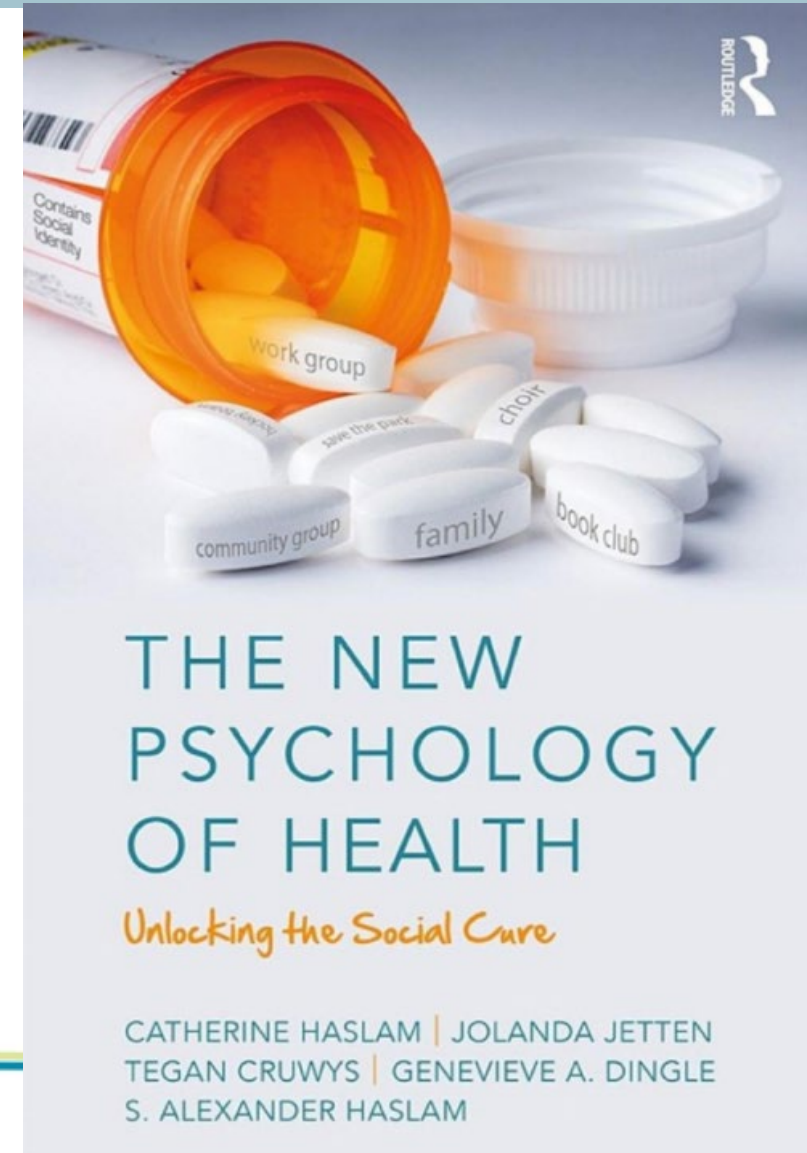
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Loneliness & Isolation Predict Health Outcomes

- Social support and social integration are the most important predictors of mortality
- Social injustice (poverty, unemployment, inadequate housing, social exclusion & poor education) reduces opportunities for people to access health services & engage in healthy behaviour
- Queensland Parliamentary Inquiry into Loneliness underway

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3 Components of Social Prescribing



1



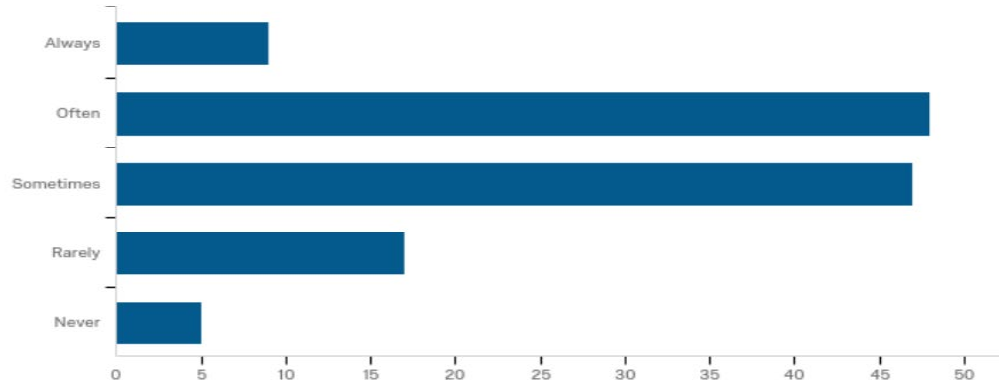
2



3

This is not new!

How frequently do you refer patients to non-health services in the community as part of a patient's treatment and wellbeing plan?



Health Profession.
Healthy Australia



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Patient Centred Care not Lone Ranger

The Medical Model is moving:

- Bio-psychosocial Model
- Team Based Care
- Health and Social Care
Neighbourhood
- Trauma Informed Care
- Patient Self-Management

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IPC Variants

Footprints:

- BSPHN funded Social Worker
- Up to 3 Chronic conditions
- Psycho-social need
- Embedded support (warm handovers)

Mater:

- M-Choose CALD Care Coordinator
- NESB
- Bio-medical & psycho-social

Groups:

- The Well Connected Group
- Groups for Health

M-Choose Results

- Improved attending
- Reduced GP visits
- NDIS, DSP access
- Health literacy increased
- Joy at work

But...

1. 2/3rds of activity involves external liaison
2. No room rental yet embedding works
3. Changes to GP workflow



10 Years Ahead

- People using health services can readily follow established pathways, with navigational supports if needed, to connect to the care they need, in the health system and with social care options
- Patients have enhanced access to services through their chosen practice...over time service enhancements will be added and integrated such as social prescribing and other modes of virtual care.
- The value of social prescribing and link and support workers with lived experience cannot be underestimated to provide tailored support to specific populations.
- Develop a national social prescribing framework linked with primary health care, enabled through PHNs within 12 months.

CONSULTATION DRAFT

Future focused primary health care: Australia's Primary Health Care 10 Year Plan 2022-2032

October 2021

This Consultation Draft has been released for the purpose of seeking the views of people and organisations with an interest in primary health care.

Please note the Consultation Draft will inform the final Primary Health Care 10 Year Plan. It does not constitute the final position of the Australian Government.

The plan will be further considered in light of feedback provided in the consultation.

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